## Request for CyD/CETU Course Evaluation - ICS/SCADA under the FBI Training Generic Clearance (OMB Control Number: 1110-0076)

**TITLE OF INFORMATION COLLECTION:** ICS/SCADA Course Evaluation

**PURPOSE:**

The course evaluation surveys will gather feedback from participants in the Federal Bureau of Investigation’s Cyber Education and Training Unit’s ICS/SCADA security courses. These Level 1 Evaluations will evaluate the effectiveness of the training, students’ perceptions, potential future improvements, and justification for the training expense.

**DESCRIPTION OF RESPONDENTS**:

The student evaluation will be provided to all individuals who participate in the Cyber Education and Training Unit’s ICS/SCADA security courses. The vast majority of the included respondents will be FBI employees; however, Task Force Officers may be accepted into some sessions.

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [ X] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[ ] Focus Group [ ] Other: (please describe) \_

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Sean N. Pruitt

CyD/Cyber Education and Training Unit

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [ X ] No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [ ] Yes [ ] No

***Note: for any privacy related questions regarding your collection, please contact your component’s Senior Component Official for Privacy or the Office of Privacy and Civil Liberties.***

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [ X ] No

If answering yes, you will also need to describe the incentive and provide a justification for the amount.

**BURDEN HOURS**:

In the provided table, list the following information in each row for the type or respondent for the collection and provide total figures at the bottom for the number of respondents, participation time, and burden.

* Category of respondent – Provide the type or category of individual who will respond to your collection from the following list: o
  + Individuals or Household
  + Private Sector
  + State, Local, or Tribal Governments
  + Federal Government
* Number of Respondents – Estimate of the total number of respondents by type/category.
* Participation Time – Estimate of the total amount of time (in minutes) required for participation in a collection by type/category of respondents (e.g. fill out a survey or participate in a focus group).
* Burden – Estimate of the annual burden hours by type/category or respondents.
  + To determine this estimate, multiply the number of respondents by the participation time and divide that figure by 60.

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **No. of Respondents** | **Participation Time** | **Burden** |
| Course Participants | 30 | 10 | 5 |
|  |  |  |  |
|  |  |  |  |
| **Totals** |  |  |  |

**FEDERAL COST:** The estimated annual cost to the Federal government is \_\_\_5 hours\_\_\_

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? [ X ] Yes [ ] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

The universe of potential respondents is all students who participate in the ICS/SCADA courses sponsored and/or delivered by the FBI’s Cyber Education and Training Unit. All participants will be have their feedback solicited through the survey tool.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

[ X] Web-based or other forms of Social Media

[ ] Telephone

[ X ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [ X ] No

**Submit all instruments, instructions, and scripts with the request.**